

FACULTY OF SCIENCE AND TECHNOLOGY

EXAMINATION FOR THE DIPLOMA IN NURSING YEAR 3

SUMMATIVE EXAMINATION

ACADEMIC SESSION 2014 (SEMESTER 6)

SND 3206: EMERGENCY AND INTENSIVE NURSING

JUNE 2014

TIME: 2 Hours

QUESTIONS

INSTRUCTIONS TO CANDIDATES

This question booklet contains two sections.

Section A

Fifty Multiple Choice Questions (MCQ)

Answer ALL questions in Section A using the multiple choice answer sheet provided.

Section B

One Modified Essay Question (MEQ)

Answer ALL questions in Section B using the answer booklets provided.

At the end of the examination, all the answer booklets, multiple choice answer sheets and the examination booklets will be collected by the invigilator.

[This paper contains FIFTY MCQ and
ONE MEQ question printed on THIRTEEN pages]

Section A: 50 marks

Answer ALL Multiple Choice Questions.

1. The triage nurse is working in the emergency department. Which patient should be assessed first? The
 - A. 10 year-old child whose dad thinks the child's leg is broken.
 - B. 45 year-old male who is diaphoretic and clutching his chest.
 - C. 58 year-old female complaining of a headache and seeing spots.
 - D. 25 year-old male who cut his hand with a hunting knife.

2. Which equipment must be immediately brought to the client's bed side when code is called for a patient who has experienced a cardiac arrest?
 - A. A ventilator.
 - B. A crash cart.
 - C. A gurney.
 - D. Portable oxygen.

3. Which of the following should be done first before administering oxygen for a breathless patient after triaging?
 - A. Urinary catheterisation
 - B. Bedside glucose test
 - C. Oxygen saturation reading
 - D. Chest x-ray

4. You are assisting in the care of a patient with cervical immobilizer following trauma. Which is the best way to lift patient to assess the spine for the patient?
 - A. Using 3-man lift
 - B. Turn the body first, then the leg
 - C. Turning the whole body and the head together as a whole
 - D. Turning the head first, then the body

5. IV adrenaline injection was given during the treatment of cardiac arrest. You should understand that adrenaline
- A. Loosen secretions and smoothen breathing
 - B. Increase rate of myocardium contractility
 - C. Encourage urine output and reduce oedema
 - D. Increase rate of atrial fibrillation
6. The nurse must monitor the sign and symptom for this condition in all trauma patients presented in the A&E department.
- A. Skin breakdown on the sacral region
 - B. Hypovolemic shock
 - C. Hypothermia
 - D. Hypocalcaemia
7. An immediate nursing intervention for a client with asystole reading from electrocardiogram is to
- A. Set up a drip.
 - B. Perform tracheal suctioning.
 - C. Assist the doctor in defibrillation.
 - D. Perform cardiopulmonary resuscitation (CPR).
8. There is a Code Blue in the ward. Basic Life Support (BLS) should start when
- A. Relatives leave the cubicle.
 - B. The doctor arrives.
 - C. The cardiac monitor does not detect a pulse.
 - D. The patient is found with no pulse and not breathing.
9. Triage system in the emergency department is to
- A. Identify clients by disease.
 - B. Prioritize client care.
 - C. Count the number of clients waiting.
 - D. Register clients.

10. The color in triage that carry the meaning of 'Immediate' is
- A Red.
 - B Yellow.
 - C Green.
 - D White.
11. Which of the following case requires Level 2 intervention?
- A Overdose.
 - B Cardiac arrest.
 - C Severe shock.
 - D Cervical spine injury.
12. A male client is admitted to the emergency department following an accident. What is the first nursing action of the nurse?
- A Check respiration, circulation, neurological response.
 - B Align the spine, check pupils, and check for haemorrhage.
 - C Check respirations, stabilize spine, and check circulation.
 - D Assess level of consciousness and circulation.
13. The nurse is treating a 57 year old male who has been brought into the Emergency department with severe hypovolemic shock. The nurse would anticipate the doctor writing orders for
- A A fluid restriction of no more than 1.5 L of fluid per day.
 - B Strict measurement of the patient intake and output.
 - C Rapid infusion of IV fluids.
 - D Insertion of a Foley catheter.
14. What is the proper technique for opening the airway on a trauma patient?
- A Head tilt-chin lift.
 - B Flexed position.
 - C Modified head tilt-chin lift.
 - D Jaw thrust manoeuver.

15. A client has lost a large amount of blood and is showing signs of pending shock. Which condition of shock is the client experiencing?
- A Hypovolemic shock
 - B Cardiogenic shock
 - C Neurogenic shock
 - D Anaphylactic shock
16. The following can be given via endotracheal tube (ETT), EXCEPT
- A Adrenaline.
 - B Atropine.
 - C Lignocaine.
 - D Sodium bicarbonate.
17. During the secondary assessment of a client with trauma, the nurse sees the client is having problems maintaining his airway. What should the nurse do?
- A Perform neck palpation
 - B Focus on one body system at a time
 - C Revert to the primary survey
 - D Reassess using the head to toe approach
18. A teenage client was admitted to the hospital with a portion of an iron impaled in his abdomen. Which of the following should be done to help this client?
- A Apply compression bandage to stop bleeding and sedate him
 - B Support the impaled object and prepare him for surgery
 - C Auscultate for bowel sounds and prepare him for surgery
 - D Sedate the client and remove the iron immediately at emergency department
19. The client experiences shock following a spinal cord injury. This type of shock is classified as
- A Hypovolemic.
 - B Neurogenic.
 - C Cardiogenic.
 - D Anaphylactic.

20. Dobutamine (Dobutrex) is used to treat a client experiencing cardiogenic shock. The nurse would monitor the client for
- A Fluid overload
 - B Cardiac dysrhythmias
 - C Respiratory status
 - D Hypotension
21. The client in shock is prescribed an infusion of lactated Ringer's Solution. The nurse recognizes that the function of this fluid in the treatment of shock is to
- A Replace fluid, and promote urine output.
 - B Draw water into the cells.
 - C Draw water from cells to blood vessels.
 - D Maintain vascular volume.
22. A 56 year-old patient in triage with left-sided chest pain, diaphoresis, and dizziness. This patient should be prioritized into which category?
- A High urgent.
 - B Urgent.
 - C Non-urgent.
 - D Emergent.
23. In conducting a primary survey on a trauma patient, which of the following is considered one of the priority elements of the primary survey?
- A Complete set of vital signs.
 - B Palpation and auscultation of the abdomen.
 - C Brief neurological assessment.
 - D Initiation of pulse oximetry.
24. In a multiple-trauma victim, which assessment findings indicate the most serious and life-threatening condition?
- A A deviated trachea
 - B Gross deformity in a lower extremity
 - C Decreased bowel sounds
 - D Haematuria.

25. Following multiple bee stings, a client has an anaphylactic reaction. The nurse is aware that the symptoms the client is experiencing are caused by
- A Respiratory depression and cardiac standstill.
 - B Bronchial constriction and decreased peripheral resistance.
 - C Decreased cardiac output and dilation of major blood vessels.
 - D Constriction of capillaries and decreased peripheral circulation.
26. Azmi aged 5 years was diagnosed with diphtheria and was admitted to the Intensive Care Unit (ICU). The intervention that would be done for him include
- A. Monitoring his ECG to detect abnormalities.
 - B. Observing for respiratory distress to detect respiratory obstruction.
 - C. Administering antibiotics to kill the bacteria.
 - D. Giving large amount of fluids to prevent dehydration.
27. Which type of ventilator is most appropriate for the patient who requires minimal ventilator support?
- A Assist-control ventilation(ACV)
 - B Synchronized intermittent mandatory ventilation (SIMV)
 - C Pressure controlled ventilation (PCV)
 - D Pressure-regulated volume control(PRVC)
28. A patient is on mechanical ventilator. Which of the following equipment should be kept ready at bedside?
- A Water-seal chest drainage setup
 - B Manual resuscitation bag or ambu bag
 - C Oxygen analyser
 - D Tracheostomy cleaning kit
29. Which of the following nursing actions is most essential for a patient with an ET (endotracheal) tube?
- A Monitoring proper placement of the tube every 2 hours
 - B Suctioning endotracheal tube every 1 hour
 - C Monitoring arterial blood gas every 4 hours
 - D Provide oral care every 4 hour

30. A client who has undergone abdominal surgery had collapsed in the post anaesthesia care unit. The doctor assessed the client and admitted him to intensive care unit for
- A Early identification of problem
 - B Meeting the critical needs
 - C Attending to psychosocial needs
 - D Close monitoring of hemodynamic status.
31. The nurse hears the ventilator alarm ringing and finds that the client is sitting on the bed and has pulled out the endotracheal tube. Her first action is to
- A Keep the client's airways cleaned
 - B Call other members to help in resuscitation
 - C Call the doctor to reinsert the endotracheal tube
 - D Give the client manual ventilation with 100% oxygen through a bag valve mask
32. Your client received an infusion of a muscle relaxant and a high-dose sedative drug. The ventilator mode that is suitable for this client is
- A Pressure support (PS)
 - B Controlled mandatory ventilation (CMV)
 - C Intermittent mandatory ventilation (IMV)
 - D Continuous positive airway pressure (CPAP)
33. If the client who was admitted for myocardial infarction develops cardiogenic shock, which characteristic sign should the nurse expect to observe?
- A Fever
 - B Oliguria
 - C Bradycardia
 - D Elevated blood pressure

34. A client with respiratory failure is on ventilator. The alarm goes off. The nurse's initial reaction should be
- A Notify the physician.
 - B Turn off the alarm.
 - C Assess the client to determine the cause of the alarm.
 - D Disconnect the client and use the ambu bag to ventilate the client.
35. The nurse would regularly assess a client's ability to metabolize the Total Parental Nutrition (TPN) solution adequately by monitoring the client for which of the following signs?
- A Tachycardia
 - B Hypertension.
 - C Elevated blood urea nitrogen concentration.
 - D Hyperglycaemia.
36. While taking care of a patient with endotracheal intubation and mechanical ventilation, the nurse measures and monitors endotracheal cuff pressure. The cuff pressure that prevents tracheal injury is
- A 10 – 15 mmHg
 - B 15 – 20 mmHg
 - C 20 - 25 mmHg
 - D 25 - 30 mmHg
37. How frequent a nurse should perform zero calibration on pressure monitoring devices to ensure accurate reading?
- A Only during system set-up
 - B At least once following initial set-up
 - C At least every day
 - D Whenever readings are questioned
38. When caring for a client with total parenteral nutrition (TPN), what is the priority action of the nurse?
- A Record the number of stools per day
 - B Maintain strict intake and output records
 - C Sterile technique for dressing change at IV site
 - D Monitor for cardiac arrhythmias.

39. A client is receiving Total Parenteral Nutrition (TPN). Which lab test should be evaluated while the client is receiving TPN?
- A Haemoglobin
 - B Creatinine
 - C Blood glucose
 - D White blood cell count
40. When inserting an oropharyngeal airway, the client begins to gag. The nurse should
- A Continue placing the airway
 - B Apply cricoids pressure to prevent vomiting
 - C Immediately remove the airway and prepare suction
 - D Roll the client on the side and continue inserting the airway
41. Mr A was found to have thick and yellowish secretion. In order to loosen the secretion during endotracheal suction, the nurse should
- A Perform chest percussion prior to suctioning.
 - B Carry out postural drainage for 15 minutes.
 - C Give a normal saline nebulizer for 15 minutes.
 - D Drip 3-5ml distilled water into the endotracheal tube and bag the patient with ambu bag.
42. While performing cardiopulmonary resuscitation (CPR) on an infant, the nurse palpates for a pulse. Which of the following sites is best for checking the pulse during CPR on an infant?
- A Femoral artery.
 - B Carotid artery.
 - C Radial artery.
 - D Brachial artery.

43. On arrival at the intensive care unit, a critically ill female client suffers respiratory arrest and is placed on mechanical ventilation. The doctor orders pulse oximetry to monitor the client's arterial oxygen saturation (SaO₂). Which of the following condition may alter pulse oximetry value?
- A Fever
 - B Tachypnoea
 - C Tachycardia
 - D Hypotension
44. Before weaning a male client from a ventilator, which of the assessment parameter must be reviewed?
- A Fluid intake for the last 24 hours
 - B Baseline arterial blood gas (ABG) levels
 - C Hourly urine output
 - D Electrocardiogram (ECG) results
45. A nurse is performing endotracheal tube suctioning on a female client. During the suctioning procedure, the nurse notes on the monitor that the heart rate is decreasing. Which of the following is the appropriate nursing intervention?
- A Continue the suctioning
 - B Notify the physician immediately
 - C Stop the procedure and re-oxygenate the client
 - D Ensure that the suction is limited to 15 seconds
46. A nurse is administering cardiopulmonary resuscitation (CPR). The compression to ventilation ratio for two rescuer adult CPR is
- A 15:1
 - B 15:2
 - C 30:2
 - D 30:1

47. Endotracheal intubation and mechanical ventilation was initiated on an adult male with respiratory distress syndrome due to shock. His condition deteriorates rapidly. The alarm on the mechanical ventilators sounded and the nurse checked for the cause. Which condition triggered the alarm?
- A Kinking of the ventilator tubing
 - B A disconnected ventilator tube
 - C An endotracheal cuff leak
 - D A change in the oxygen concentration
48. The nurse is caring for a client who is paralyzed and requires mechanical ventilation. The client is unresponsive and has no spontaneous ventilator effort at the time. What type of ventilation should the nurse expect the doctor to order?
- A Synchronized intermittent mandatory ventilation (SIMV)
 - B Pressure-support ventilation (PSV)
 - C Intermittent mandatory ventilation(IMV)
 - D Controlled-mandatory ventilation (CMV)
49. If the victim is breathing normally, but not responding you should
- A Give mouth to mouth resuscitation
 - B Proceed with CPR
 - C Turn the victim to the side
 - D None of the above
50. The client arrives in the emergency department after a motor vehicle accident. Nursing assessment findings include BP 80/34, pulse rate 120, and respiration 20. Which of the following nursing diagnosis is a priority?
- A Alteration in cerebral tissue perfusion
 - B Fluid volume deficit
 - C Ineffective airway clearance
 - D Alteration in sensory perception

END

SECTION B - ESSAY QUESTION (25 MARKS)
ANSWER ALL PARTS

QUESTION 1

1. Mr. Ali aged 28 years, was brought to the emergency room following a motor vehicle accident. He sustained head injury.

a) Explain the assessment you would perform on him based on the following aspects.

- i) Primary survey (13 Marks)
- ii) Secondary survey (12 Marks)

END

